

### **REMARKS**

Reconsideration of the office action of October 5, 2007 is respectfully requested. As the examiner suggests, a drawing is being provided. However, no drawing is needed to facilitate an understanding of the invention. The claims recite medical devices having coatings. A drawing is not needed to understand such an invention. The examiner's comments on claim 5 have been rendered moot by the above amendment.

The claims amendments are supported, e.g., on page 9 of the specification, first paragraph and page 5, lines 28-29.

All rejections are based on Bates (US 2004/0073284) alone or in combination with other references. All rejections are untenable. Bates does not anticipate any of the claims, e.g., with respect to claims 1-46 at least because Bates fails to disclose or suggest the recited concentration of the drug coated on the surface (up to 5  $\mu\text{g}/\text{mm}^2$ ) and with respect to claims 47 and 48, at least because Bates does not disclose or suggest coating on a smooth surface.

Any details disclosed in Bates with respect to stents are not applicable to the claimed balloon catheter devices. This is true, for example, at least because of the different purposes for which stents and such catheters are used and the significantly different manner in which these are used in conjunction with the body. For instance, stents can be used to mechanically open a blocked passageway and typically remain in a body for an extended period of time and often permanently. Catheters, on the other hand, are normally used to locally administer liquid agents and/or to locally position a stent. They remain in a body for much shorter periods of time, e.g., on the order of the number of minutes required to perform such tasks. Consequently, details regarding the structure and use of stents do not straightforwardly have any bearing on related structure or use considerations for balloon catheters. Thus, none of the claims is anticipated by or rendered obvious by Bates.

This conclusion also applies to the new claims 47 and 48 reciting that the coated surface is a smooth one. Note, in Bates, for example, page 3, column 1, paragraph 15, lines 12-17 from the bottom: "The specific improvement of the present invention entails attaining a desired surface roughness, or texturing, on the surface of the device by whatever treatment of the surface

and applying the bioactive material directly to the roughened or textured surface without the need of any further overlying or containment layer or coating.”

None of the secondary references in combination with Bates renders the claims obvious.

This conclusion is true at least because none of these references alleviate the deficiencies of Bates discussed above.

Moreover, Desai deals with protein-coated particles of an active agent such as paclitaxel which are suitable for intravenous application as such. Desai has nothing to do with design of coatings on devices such as those claimed and in no way would suggest the features of claims 10 and 30. Barry deals with polymer compositions coated on medical devices to achieve sustained release. See, e.g., column 1, lines 45-60. This has nothing to do with the immediate release feature of the claims of this application. Klaveness’s teachings relating to ultrasound contrast agents have nothing to do with the claimed subject matter and cannot possibly render any of the features of the rejected claims obvious. In no way does Klaveness suggest using iopromide in the way recited in the rejected claims.

The Commissioner is hereby authorized to charge any fees associated with this response or credit any overpayment to Deposit Account No. 13-3402.

Respectfully submitted,

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